

APPLICATION FOR INSTALLATION/BASE PASS (USFK FORM 37EK) (USFK REG 190-7) (SEE PRIVACY ACT STATEMENT ON REVERSE)						DATE				
SECTION I - TO BE FILLED OUT BY SPONSOR AND APPLICANT (TYPE OR PRINT)										
<input type="checkbox"/> PERMANENT		<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL		<input type="checkbox"/> RENEWAL		<input type="checkbox"/> UPDATE		
ACCESS AREA (If USFK or EUSA; Special processing required)			FPCON (A, B, C, D)		ESCORT PRIVILEGES		TIME		DAYS	
<input type="checkbox"/> * SHORT-TERM VISIT REQUEST (US DoD ONLY MAY APPLY; Not to exceed 60-Days)										
1. NAME (LAST, FIRST, MIDDLE)				2. SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE		3. KID/SSN OR PASSPORT				
4. DOB (YYMMDD)		5. HEIGHT	6. WEIGHT	7. HAIR	8. EYES	9. GLASSES <input type="checkbox"/> YES <input type="checkbox"/> NO		10. POB (CITY/COUNTRY)		
11. CURRENT ADDRESS & PHONE NO. (ST NO., CITY & PROVINCE)										
12. SPONSOR (FULL NAME/RANK)			13. SPONSOR SSN			14. SPONSOR ORG & PHONE NO.				
15. JUSTIFICATION FOR PASS OR VISIT (ATTACH PHOTO-COPY OF KID CARD OR PASSPORT)										
SPONSOR STATEMENT OF UNDERSTANDING I fully understand my responsibilities as a sponsor for the control of the person identified at the top of this application. All information submitted is true and ccorrect to the best of my knowledge. I further understand that it is my responsibility to ensure that I notify the Installation Pass & ID Office of any change in my status as a sponsor or any knowfedge of misuse of the pass to be issued. It is my responsibility to ensure that the pass is returned to the Installation Pass & ID Office if it is not renewed or expires prior to my DEROS. If this Pass is issued to an employee or contractor, upon termination of employment or services being provided, I will ensure the issued pass is returned to the Pass and ID Office. Failure to comply with these requirements may result in the loss of sponsor privileges, or imposing legal or other administrative actions against me.										
SIGNATURE OF SPONSOR								DATE		

SECTION II - TO BE FILLED OUT BY DoD SPONSOR, CPOC OR USACCK

16. GRADE/RANK	17. JOB TITLE	18. DATE OF EMPLOYMENT
19. UNIT/AGENCY/COMPANY ADDRESS/PHONE NO.	20. PAY ACCOUNTING NO.	
	21. CONTRACT NO.	
	22. CONTRACT PERIOD (YYMMDD-YYMMDD)	

SECTION III - TO BE FILLED OUT BY PASS & ID OFFICE OR PMO

23. BACKGROUND CHECK WITH LAST 5 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO	24. DATE COMPLETED	<input type="checkbox"/> a. COPS <input type="checkbox"/> b. KNP <input type="checkbox"/> c. US Embassy
25. IS APPLICANT A DESIGNATED COUNTRY PERSON (DCP) ? <input type="checkbox"/> YES <input type="checkbox"/> NO	26. REQUESTED BY US O-6 OR DoD CIV EQUIVALENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	
27. MISSION/EMERGENCY ESSENTIAL? <i>(As designated by TDA/Job Position)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO	28. DATE PASS ISSUED	29. PASS EXPIRATION DATE

I HAVE REVIEWED THIS APPLICATION AND IT'S SUPPORTING DOCUMENTS.
ALL DOCUMENTS **SUPPORT OR DO NOT SUPPORT** APPROVAL OF THIS PASS REQUEST.

30. SIGNATURE OF PASS & ID SECTION CHIEF OR NCOIC	DATE
---	------

SECTION IV - REQUESTING & APPROVING AUTHORITY

I HAVE REVIEWED USFK REG 190-7, SPECIFICALLY CHAP 2. THE APPLICANT HAS NO DEROGATORY INFORMATION THAT WOULD PROHIBIT APPROVAL OF THIS REQUEST. Recommend <input type="checkbox"/> Approval <input type="checkbox"/> Disapproval	SIGNATURE <i>(US O-6, OR DOD CIV EQUIVALENT OR HIGHER)</i> _____
	SIGNATURE <i>(US O-6, OR DOD CIV EQUIVALENT OR HIGHER)</i> _____
<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove	

PRIVACY ACT STATEMENT

- AUTHORITY:** Title 10, USC, 3012(g).
- PRINCIPAL PURPOSE(S):** Use of Social Security Number or Korean Identification number is an additional means of identification of individuals.
- ROUTINE USES:** An individuals Social Security Number or Korean Identification number, together with name and other personnel identifying data, may be used for the collection of derogatory information on file within DoD, host nation and other Law Enforcement Agencies in determining an individuals suitability for access to USFK installations in Korea.
- MANDATORY OR VOLUNTARY DISCLOSE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:** Disclosure of information is voluntary. Failure to provide required data may result in denial of access to USFK installations.

INSTRUCTIONS FOR COMPLETING USFK FORM 82-E (APPLICATION FOR INSTALLATION PASS)

SECTION I - Sponsor or Applicant will:

a. Select type of Pass, Permanent or Temporary; indicate Initial, Renewal or Update of desired Pass *(Include photocopy of current Pass, KID Card or Passport w/photo)*

b. Input Access Area, (EX. YONGSAN, Area 1a, Osan). Must be specific & for Official duty only.

NOTE: Request for USFK or EUSA - wide Access require Approval from the USFK Deputy Chief of Staff. Request for this type of access will be forwarded through the CFC/USFK Provost Marshal Office, Security Division (FKPM-S), for processing and submission to the USFK DCofS.

c. Input desired **FPCON, ESCORT PRIVILEGES, TIME and DAYS** access is required.

d. SHORT TERM VISITS. Personnel sponsored by US DoD personnel may use this form when requesting this type access. In Block #15, specify purpose, time period of visit; not to exceed 60 days, and provide sponsor's information, visitor's personnel ID number (SSN or Passport #).

1. NAME (Name information must match national registry, ex. SSN/KID Administrations)

2. SEX (Check appropriate block)

3. KID/SSN or Passport; (Input correct numbers/information)

4. DOB; (2 DIGIT Year, Month, date format, ex. 751005)

5. Height; (Use inches)

6. Weight; (Use pounds)

7. Hair Color

8. Eye color

9. Glasses, Yes or No; (Indicate Contacts if worn)

10. POB; (ex. Seoul, Korea or Atlanta, GA USA)

11. Current Address in Korea (Full Civilian Off-Post Address, if DoD, Full APO Address)

Blocks 12, 13, 14; Sponsor Information (Provide all required information)

15. JUSTIFICATION; Provide detailed information that supports the type of Access requested. List specific locations and frequency of access. (ex. Travel to CRC, Cp Casey, and Osan 2 X weekly to deliver Supplies) **SPONSOR WILL READ and SIGN STATEMENT OF UNDERSTANDING.**

SECTION II - DoD SPONSOR, CPOC OR USACCK will:

16. Provide current Grade/Rank of Applicant or Contractor.

Blocks 17, 18; Provide Official Job Title and date began employment with USFK.

19. Input Official Unit or Civilian Agency Address and Telephone number. (Use USFK APO or local Korean Address)

20. Information provided by sponsoring Units RM Section or CPOC, as applicable.

Blocks 21, 22; (This information is required data for all contractor applicants) *(If applicant is a contractor, SF Forms 26 and 30 or USFK Form 175-R MUST be submitted with this application.)*

SECTION III - PASS & ID Office or PMO will:

Blocks 23-29; Review Application and supporting documents. Answer YES or NO. Input correct dates regarding Background Checks and Pass issue data.

30. Signature of Pass & ID Section Chief or NCOIC that reviewed of application for completeness. Indicate whether documents **SUPPORT or DO NOT SUPPORT** approval of this pass request.

SECTION IV - REQUESTING & APPROVING AUTHORITY will:

Indicate **APPROVE OR DISAPPROVE** and sign USFK Form 82-E in Section IV.